

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-476)**

SERIAL NO.
595741
APPLICANT(S)

FILING DATE
6-16-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
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50						
TOTAL	3					
TOTAL	46					
TOTAL	49					

BEST AVAILABLE COPY

	NO.	DEF.	NO.	DEF.	NO.	DEF.
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